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## APPLICANTS

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 \*\* CONTINUING DATA *None cn* \*\*\*\*\*

 \*\* FOREIGN APPLICATIONS *None cn* \*\*\*\*\*

 IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 5	TOTAL CLAIMS 5	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance? <i>cn</i>	EXAMINER'S SIGNATURE <i>Ch. d. Hrr</i>	INITIALS <i>cn</i>		
Verified and Acknowledged				

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## TITLE

Piping clamp for concrete form

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